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FAMILY NAME:	WAJS	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	ANDREW AUGUSTINE	DEMAND RECEIVED (Y/N):	N
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APPLICATION TITLES:

SYSTEM FOR PROCESSING AN INFORMATION SIGNAL

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

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APPLICANTS
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**** CONTINUING DATA *******
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**** FOREIGN APPLICATIONS *******
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 08/14/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY NETHERLANDS	SHEETS DRAWING 7	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 3
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TITLE
SYSTEM FOR PROCESSING AN INFORMATION SIGNAL

FILING FEE RECEIVED 1038	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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